Using Stage of Change Criteria to Increase Vegetable Intake Among WIC Children

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U.S. children don't eat enough vegetables

- 2-11 year olds eat2 servings/day
 - 1/4 eat <1 serving/day</p>
 - Potatoes account for 1/2 of intake

(1996 CSFII)



Iowa data about adults

- 15% eat 5 servings/day
 - U.S. = 23.6%
 - 1996 BRFSS
- Average 1.7 servings/day
 - 1999 Iowa EFNEP



Pick A Better Snack

- Social marketing campaign
- Replace high-fat, empty calorie snacks with fruits & vegetables



Barriers to serving vegetables

- Inconvenience & time to prepare
- Limited access
- Neophobia
- Fear of food waste
- Confusion over the 5-A-Day message

(Iowa focus group data, 1999)

Messages ≠ needs & wants

- Prescriptive approach to nutrition education
 - Based on problems detected in screening

- Practical information
 - Choosing
 - Storing
 - Preparing
- Child feeding tips
 - New foods

Revitalize quality nutrition services

- Focus on what messages are provided
- Change <u>how</u> services are provided by using stages of change & critical thinking skills

Project goals

- Revitalize WIC nutrition services to be:
 - More interactive
 - Client-focused
 - Messages that meet needs & wants
- Improve health of 2-5 year olds by
 - variety & daily intake of vegetables

Constructs for eating vegetables

- Does the parent offer vegetables?
- Does the child accept the vegetables?

What is the interaction between the parent and child if vegetables are <u>not</u> accepted?

Screen to identify stage of change

- "Stage" parents' willingness to offer vegetables
- Adapt a tool validated with young adults
 - USDA regional project NC-219



Stages of Change (Transtheoretical Model or TTM)

- Stages = when
 - Precontemplation
 - Contemplation
 - Preparation
 - Action
 - Maintenance

- Processes = how
 - Consciousness raising
 - Dramatic relief (role-playing)
 - Self-reevaluation

Educate using critical thinking model

 The process of analyzing, synthesizing & evaluating situations before solving everyday problems



Interactive nutrition ed modules

- Role-playing & scenarios
- Probing questions
- Food preparation
- Taste-testing
- Goal setting

Address stages of change
 & identified barriers to
 offering vegetables



Nutrition ed modules

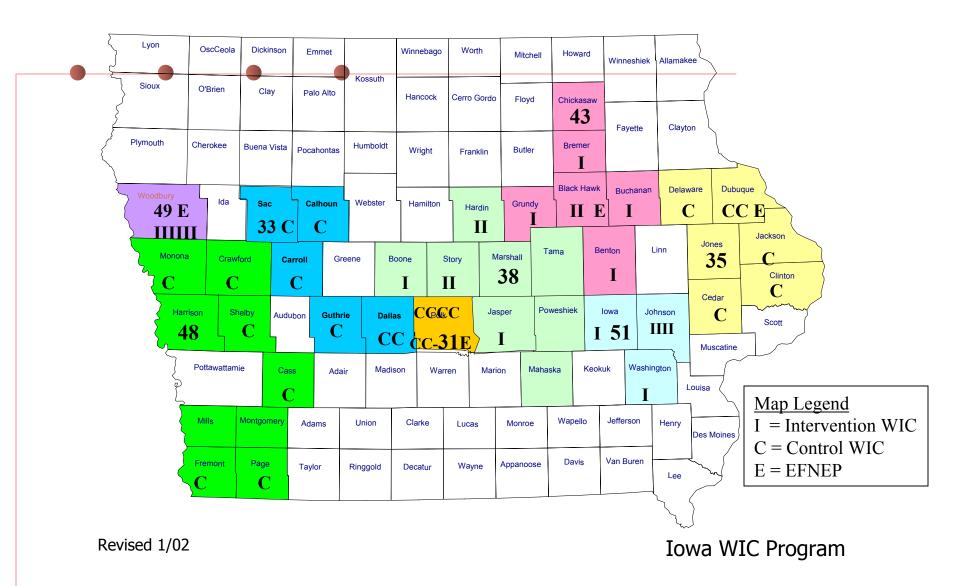
- Interactive & hands-on
- Easy to display & transport
- Can be used by a variety of people
- "Low tech"

- Print materials & incentives as appropriate
- English & Spanish

Project design

- 6 clinics in each of 4 local agencies
- Randomly selected
- Stratified by presence of EFNEP & Spanish-speaking population (>10%)
- Similar number of controls

Location of intervention & control clinics



Sample size

- Enrollment will be completed in four 6-month waves
- 534 parents of 2-5 year old children will receive intervention services during each wave
- Systematic sampling to account for walk-ins

At the time of certification

- Assess parent's stage of readiness
- Identify parent's barriers
- Provide targeted hands-on nutrition ed
- Schedule second ed contact

Second education contacts

- Provide a hands-on interactive contact at WIC clinic or in the community
- Provided by WIC LD/RD, EFNEP program assistants & others
- Directed to parent; some encounters will involve the child, too

Partnerships are key

- EFNEP
- Iowa NutritionEducation Network
- Community-based nutrition coalitions
- Iowa Dept. of Agriculture



Goals of partnerships

- Consistent & reinforcing messages
- Reduce duplication in services
- Assure effective use of resources
- Coordinate training opportunities
- Mobilize collaboration across the board

Outcome evaluation

- Parents' knowledge, attitude & practices
- Parents' stage of change
- Children's intake (variety & servings)
- Redemption of FMNP checks
- Analysis of all data
- Analysis of data from children in project for at least 12 months

Summative evaluation

- Cost-effectiveness
 - # of participants to measure recruitment
 - % improving intake to measure outcomes

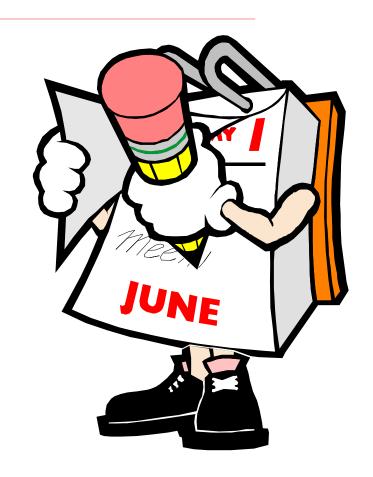
Web-based toolkit

- Staging tool
- Examples of interactive educational activities & supporting materials
- Tip sheets for sharing ideas & strategies for cultivating partnerships

Implementation

June 15, 2002

Project will include3 WIC Farmers'Market seasons



Steering committee

- Brenda Dobson, WIC Nutrition Coordinator
- Judy Solberg, Bureau Chief, Bureau of Nutrition
- Peggy Haafke Martin, Iowa EFNEP Coordinator (formerly Connie Betterley)
- Grace Marquis, Iowa State University
- Mary Jane Oakland, Iowa State University
- Esi Colecraft, Study Coordinator, Iowa State University

Other ISU personnel

- Statistician
- Economist
- Research assistants
 - Nutrition (all 3 years)
 - Economics (years 2-3)

Progress since October 2001

- Intervention training: April 2002
- Data collection training: May 2002
- Printed/distributed nutrition ed modules
- Implementation: June 17, 2002
- Second enrollment cycle:December 15, 2002

Preliminary Results (Phase 1)

- WIC data system
 - Socio-demographic information
 - Child anthropometry
 - Nutrition & health risk indicators

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 - Stages of change algorithm

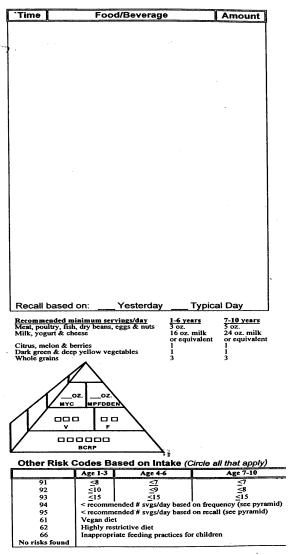
Stages of change algorithm

Visit date (mm/dd/yy)://	_				
1. How many times a day do you us	ually offer vegeta	ables to your	child?		
□ 0 □ 1 □ 2	☐ 3 or more times				
<u> </u>			1		
2a. Do you intend to start offering your child vegetables at least 3 times a day within the next 30 days to 6 months? If Yes, ask within 30 days or within 6 months No Yes, within Yes, within 6 months 30 days		2b. Have you been offering your child vegetables at least 3 times a day for more than 6 months?			
	$\hat{\mathbb{I}}$				
TM TAGE: Pre Contemplation Preparation (P) Action Maintenance (A/M)					ce
3. What difficulties do ybu					
Barriers (check all that apply)	Spontaneous responses	Probed responses	Module reference # PC/C P A/M		
Lack of time					
Inconvenience					
Don't know how to prepare					
Child doesn't like them					
Don't know about child benefits					
Don't have a way to get vegetables					
Too Expensive					
My husband/ boyfriend doesn't like them					
Other (specify):					
No barrier					

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 - Stages of change algorithm
 - WIC child diet & health history forms

WIC child diet history form

Please circle the foods your child ate last week.	DAY	WEEK
skim milk 1% milk 2% milk whole milk		
choc. milk cheese cottage cheese yogurt		
pudding custard frozen yogurt ice cream		
	/2-3)	/14-21
oranges tangerines grapefruit		
canteloupe watermelon honeydew		
strawberries raspberries kiwi fruit		
orange juice grapefruit juice Juicy Juice®		
apple juice grape juice pineapple juice		
other juice apples applesauce grapes		
peaches nectarines pears apricots fruit cocktail bananas mango papaya		
starfruit	/3	/21
Starruit	/4	/28
potatoes green peas corn hominy		
spinach kale collard greens broccoli		
carrots sweet potatoes yams winter squash		
green beans cauliflower cabbage celery zucchini cucumbers lettuce bell pepper		
tomatoes tomato sauce tomato juice		
V8 juice® mixed vegetables asparagus	/3	/21
ve juices inixed vegetables asparagus	/5	/35
		1
whole wheat bread rye bread		l
oatmeal bread bran bread whole wheat crackers		
rye crackers graham crackers		
whole wheat pasta popcorn	Ì	l
granola cereal bran cereal oatmeal	i	
cold cereal		
Malt-O-Meal® Cream of Wheat®	l	
noodles macaroni spaghetti other pasta		1
rice white bread buns tortillas/tacos		
corn bread biscuits muffins quick breads		l
French toast pancakes waffles		1
pizza pocket bread/pita bagel		i
saltines other snack crackers pretzels	1	
cake animal crackers cookies	/5	/35
donuts Poptarts® sweet rolls	l	
	/6	/42
pork and beans chili beans navy beans	1	1
split peas lentils other dried beans	ì	Ì
chicken turkey duck pheasant		
tuna salmon shrimp other fish		ı
hamburger/ground beef steak stew meat	1	
roast chops ham pork lamb	1	
other ground meat liver heart kidney deer meat lunch meats hot dogs sausage	l	
brats eggs omelet other egg dishes		
peanut butter nuts seeds		1
pount outer name seems	/3	/21
	/21	
Dietary Score	 '2'	
water coffee decaf coffee tea decaf tea	1	1
herbal tea lemonade sport drinks HiC®		1
Koolaid® Sunny Delight® pop diet pop	1	



Summary

Nutrition educators must provide practical information to improve parents' meal planning & food prep skills.

Young children must be exposed to new foods to develop sound eating practices for the future.